

(An equal opportunity employer)

PRE-EMPLOYMENT APPLICATION

Email Present street address City State Zip Present street address City State Zip Present street address City State Zip Present telephone number (s) Referred by Date you can start Desired salary Are you willing to travel? Relocate? Research following information regarding your driver's license and record if you are applying for a position which requires you to drive for CGRS: incense type State of issue No. Driving record (past 5 years) please provide a copy. Image: Company Name Supervisor's Name Your title No./tr. Mailing Address Supervisor's Name Your Duties Reason for leaving Phone Number Job Duties Reason for leaving Prom To To To To Address School Name Type of Area of Study Degree Type Additional Information Prom To To To To To To To	EKSUNAL II	NFURIVIATION								
Mailing address	Name					Email _.				
Mailing address						City St				
Date you can start	Mailing addr	ress				City				
Date you can start	Present tele	phone number (s))							
Desired salary Are you willing to travel? Relocate? lease complete the following information regarding your driver's license and record if you are applying for a position which requires you to drive for CGRS: incense type State of issue No Driving record (past 5 years) please provide a copy. MPLOYMENT HISTORY (please complete the following for your last four employers, beginning with your most recent job.)	Position desi	ired				Referr	ed by			
Reason for leaving From From To From	Date you car	n start	Desired s	salary		Are you will	?	Relocate?		
icense typeState of issue										
MPLOYMENT HISTORY (Please complete the following for your last four employers, beginning with your most recent job.) Dates Company Name Mailing Address Supervisor's Name Phone Number Job Duties Reason for leaving										
Dates Mo./Yr. Company Name/ Mailing Address Supervisor's Name Phone Number Your Title / Job Duties Reason for leaving										
Dates Mo./Yr. Company Name/ Mailing Address Supervisor's Name Phone Number Your Title / Job Duties Reason for leaving										
Dates Mo./Yr. Company Name/ Mailing Address Supervisor's Name Phone Number Your Title / Job Duties Reason for leaving	MPLOYMEN	NT HISTORY (Please	complete the fol	llowing for you	ur last fo	our employers, beginni	ng with your most r	ecent	job.)	
From _/_ To _/_ To _/_ To _/_ To _/_ To _/_ To _/_ From _/_ To _/_							-			
From/_ To/_ From/_ To/_ From/_ To/_ EDUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates	Mo./Yr.	Mailing Address	Phone Nun	nber	Job [Outies				
From/_ To/_ From/_ To/_ From/_ To/_ EDUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates								$\perp \downarrow$		
From/_ To/_ From/_ To/_ From/_ To/_ Ducation History (Please complete the following for your education background, beginning with high school.) Dates		-								
From/_ To/_ From/_ To/_ EDUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ From/_ To/_ From/_ To/_	10/	_								
From/_ To/_ From/_ To/_ EDUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ From/_ To/_ From/_ To/_										
From/_ To/_ From/_ To/_ EDUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ From/_ To/_ From/_ To/_	F===== /	1	 		+			++		
From/ To/_ To/_ To/_ To/_ To/_ To/_ To/_ From/_ To/_ To/_ From/_ To/_ From/_ From/_ From/_ From/_ To/_ From/_ To/_ From/_ To/_		-								
From/_ To/_ To/_ DUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ To/_ To/_										
From/_ To/_ To/_ DUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ To/_ To/_										
From/_ To/_ To/_ DUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ To/_ To/_	Erom /		+		+			$\dashv \dashv$		
From/_ To/_ DUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates		1								
DUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ To/_ To/_		1								
DUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ To/_ To/_										
DUCATION HISTORY (Please complete the following for your education background, beginning with high school.) Dates School Name Type of Area of Study Degree Type Additional Information Mo./Yr. Address School From/_ To/_ To/_ To/_	From /		+		+			+		
Dates School Name Type of Area of Study Degree Type Additional Information										
Dates School Name Type of Area of Study Degree Type Additional Information										
Dates School Name Type of Area of Study Degree Type Additional Information										
Dates School Name Type of Area of Study Degree Type Additional Information		<u>. I</u>			1					
Dates School Name Type of Area of Study Degree Type Additional Information	DUCATION	HISTORY (Please con	nnlete the follow	ina for vour e	ducation	n hackaround, beginnir	na with high school.)		
Mo./Yr. Address School From/			ipiece ine jene		######################################				Additional Information	
From/_ To/_ To/_ From/_ To/_						,				
From/ To/ From/	From/_						<u> </u>			
To/	To/	_								
To/	/			<u></u>		_	_	+		
From/		-								
	10									
	From/_							+		

To/										
To/										
CLERICAL SKILLS										
Classification	el/Experience	in Yrs.	Class	Classification			Proficiency Level/Experience in Yrs.			
Word processing software					Accounting Skills					
Spreadsheet software		Techni			ical writing					
Database software			Other:							
Other software		Othe			Other:					
							1			
PECIAL TRAINING/CER	TIFICATION									
Classification		Certifying En	tity		Certification Date			License Num	ber	
PEEEDENICES (8/2	4 - 4 h - 6 - 11						la			
REFERENCES (Please comple					om you nave k					
Reference Name	Phone Numb	er/Address	Busines	SS		Relation	nship to \	rou	Years Known	
uthorization and Release										
authorization and Release										
h a u a ha a a a a a fa a fa a fa a fa a								black if amountain	ad falaifiad	
hereby certify that the facts conta catements on this application will			complete t	o the be	st of my knowl	eage and un	derstand	that, if employe	ea, faisifiea	
atements on this application will	be grounds for distill	3301.								
addition, I authorize investigatio	on of all statements c	ontained herein	and autho	rize the ı	eferences and	employers li	sted abov	e to give the re	presentatives of	
GRS, Inc. any and all information										
ereby release CGRS, Inc. and all s	uch employers and re	eferences from a	II liability f	or any d	amage which n	nay result fro	om utilizat	tion of such info	ormation.	
				1					de auto a d	
acknowledge that Colorado is an one of the color of the c										
ny agreement contrary to the fore				_			specified	period of time,	, or to make	
my agreement contrary to the force	.50116, 4111033 10 13 111	witting and oight	ca by an ac							
understand that CGRS, Inc. is a dr	ug free workplace.									
andianat Cianatura				A	liantian Data					
pplicant Signature				Арр	ilication Date					
nterviewed by				Inte	rview Date					

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.